

## SOIL TEST REQUEST FORM

Owner of property\_\_\_\_\_

Address of testing\_\_\_\_\_

Owner's phone number\_\_\_\_\_

Engineer's name and phone number\_\_\_\_\_

Installer's name and phone number\_\_\_\_\_

Please circle the following items that apply to the request:

-Vacant lot /lots

-B 100a

What is planned addition?\_\_\_\_\_

-Repair

Year the house was built\_\_\_\_\_

Number of existing bedrooms\_\_\_\_\_

Is there an existing As-Built?\_\_\_\_\_

Is there an existing plot plan?\_\_\_\_\_

### FOR OFFICE USE ONLY

- PERMIT # \_\_\_\_\_
- PAYMENT – \$ 50.00/SOIL TESTS (PER LOT) – B100
- – \$100.00/SOIL TESTS FOR NEW LOTS/REPAIRS
- FIELD CARD ATTACHED
- SCHEDULED DATE AND TIME \_\_\_\_\_